## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1793-0006

| CLAIMS AS FILED - PA<br>(Column 1) |   |   |                 |                        | RT I<br>(Column 2)               |                  |              | SMALL ENTITY TYPE   |                        |         | OTHER THAN OR SMALL ENTITY |                        |  |
|------------------------------------|---|---|-----------------|------------------------|----------------------------------|------------------|--------------|---------------------|------------------------|---------|----------------------------|------------------------|--|
| TOTAL CLAIMS                       |   |   | Ų.              |                        |                                  |                  | Γ            | RATE                | FEE                    |         | RATE                       | FEE                    |  |
| FOR                                |   |   | NUMBER FILED    |                        | NUMBER EXTRA                     |                  | В            | ASIC FEE            | 375.00                 | OR      | BASIC FEE                  | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS            |   |   | سinus 20=       |                        | * 0                              |                  |              | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS                 |   |   | / minus 3 =     |                        | * 0                              |                  |              | X42=                |                        | OR      | X84=                       |                        |  |
| MU                                 | LTIPLE DEPEN                            | DENT CLAIM PF                             | RESENT          |                        |                                  |                  | Ī            | +140=               |                        | OR      | +280=                      |                        |  |
| * If                               | the difference                          | in column 1 is l                          | ess than ze     | ess than zero, enter " |                                  | "0" in column 2  |              | TOTAL               | 375                    | OR      | TOTAL                      |                        |  |
|                                    | CI                                      | LAIMS AS A                                | MENDED          | D - PART II            |                                  |                  |              |                     |                        |         | OTHER THAN                 |                        |  |
|                                    |   | (Column 1)                                | (Colur          |                        |                                  | (Column 3)       |              | SMALL E             |                        | OR      | SMALL                      |                        |  |
| AMENDMENT A                        |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUM<br>PREVI           | HEST<br>IBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA |              | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|                                    | Total                                   | *   | Minus           | **                     |                                  | =                |              | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
|                                    | Independent                             | *   | Minus           | ***                    | <b>-</b> 0. 4.0.4                |                  |              | X42=                |                        | OR      | X84=                       |                        |  |
|                                    | FIRST PRESE                             | NTATION OF MI                             | ULTIPLE DE      | PENDEN                 | CLAIM                            | لللا             |              | +140=               |                        | OR      | +280=                      |                        |  |
|                                    |   |   |                 |                        |                                  |                  |              | TOTAL               | ,                      | OR      | TOTAL<br>ADDIT. FEE        |                        |  |
|                                    |   | (Column 1)                                |                 | (Colu                  | ımn 2)                           | (Column 3)       | А            | DDIT. FEE           |                        |         | ADDIT. FEE                 |                        |  |
|                                    |   | (Column 1)<br>CLAIMS                      |                 |                        | HEST                             | (Column 3)       | lг           |                     | ADDI-                  | 1       |                            | ADDI-                  |  |
| AMENDMENT B                        |   | REMAINING<br>AFTER<br>AMENDMENT           |                 | PREV                   | MBER<br>HOUSLY<br>D FOR          | PRESENT<br>EXTRA |              | RATE                | TIONAL                 |         | RATE                       | TIONAL<br>FEE          |  |
|                                    | Total                                   | *   | Minus           | **                     |                                  | =                |              | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
|                                    | Independent                             | *   | Minus           | ***                    |                                  | ]=               |              | X42=                |                        | OR      | X84=                       |                        |  |
|                                    | FIRST PRESE                             | NTATION OF M                              | ULTIPLE DE      | PENDEN                 | IT CLAIM                         |                  | 1            | +140=               |                        | OR      | +280=                      |                        |  |
|                                    |   |   |                 |                        |                                  |                  | L            | TOTAL               |                        | OR      | TOTAL                      |                        |  |
|                                    |   | (Column 1)                                |                 | (Coli                  | umn 2)                           | (Column 3)       | Α            | DDIT. FEE           |                        | 4       | ADUII. FEE                 |                        |  |
| AMENDMENT C                        |   | CLAIMS REMAINING AFTER AMENDMENT          |                 | HIG<br>NU<br>PRE\      | HEST<br>MBER<br>/IOUSLY<br>D FOR | PRESENT<br>EXTRA |              | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|                                    | Total                                   | *   | Minus           | **                     |                                  | =                | 11           | X\$ 9=              |                        | OR      | X\$18=                     |                        |  |
| ME                                 | Independent                             | *   | Minus           | ***                    |                                  | =                | ]            | X42=                |                        | OR      | V04                        |                        |  |
|                                    | FIRST PRESENTATION OF MULTIPLE DEPENDEN |   |                 |                        | NT CLAIN                         | 1                | ┨┟           | <del></del>         |                        | 1       |                            |                        |  |
|                                    | If the entry in colu                    | umn 1 is less than                        | the entry in co | lumn 2. w              | rite "0" in c                    | olumn 3.         | Ĺ            | +140=               |                        | OR      | TOTAL                      |                        |  |
| *                                  | * If the "Highest N                     | umber Previously I<br>umber Previously    | Paid For" IN TI | HIS SPACE              | E is less th                     | an 20, enter "20 | )." <i>p</i> | TOTAL<br>ADDIT. FEE |                        | OR      | ADDIT. FEI                 | <u> </u>               |  |
|                                    | The "Highest Nu                         | mber Previously P                         | aid For" (Total | or Indepe              | ndent) is th                     | ne highest numb  | er fou       | ind in the ap       | propriate be           | ox in c | olumn 1.                   |                        |  |